CD-14E Rev. 12-05

## Structured Decision Making Risk Assessment (CD-14E)

The risk assessment identifies families, which have low, moderate, high, or very high probabilities of future abuse or neglect. By completing the risk assessment, the worker obtains an objective appraisal of the likelihood that a family will maltreat their children in the next 18 to 24 months. The difference between risk levels is substantial. High risk families have significantly higher rates of subsequent referral and substantiation than low risk families, and are more often involved in serious abuse or neglect incidents.

When risk is clearly defined and objectively quantified the agency can ensure that resources are targeted to higher risk families because of the greater potential to reduce subsequent maltreatment

The risk assessment is based on research on cases with substantiated abuse or neglect that examined the relationships between family characteristics and the outcomes of subsequent substantiated abuse and neglect. The tool <u>does not predict</u> recurrence, but simply assess whether a family is more or less likely to have another incident without intervention by the agency.

Which Cases: All investigations and family assessments, including new

investigations/assessment as a result of a new report on an open case. Also FCS/FCOOHC openings that have not had risk assessment prior to

current opening.

When: The risk assessment is completed at the conclusion of the investigation/

assessment.

**Who:** The assigned CPS worker.

Note: Complete the family risk assessment <u>only if</u> one was not completed prior to the case opening. If there is a recent risk assessment or risk reassessment (CS-16E), it should be attached to the CD-14A. See form instructions for completing the Risk Reassessment (CS-16E).

# The SDM Risk Assessment and the Risk Reassessment are used only with families where there are children in the home.

The risk assessment form is composed of two indices: the neglect assessment index and the abuse assessment index. Only one household can be assessed on a risk assessment form. If two households are involved in the alleged incident(s), separate risk assessment forms should be completed for each household.

The household includes all persons who have significant in-home contact with child(ren), including those who have a familial or intimate relationship with any person in the home.

The primary caretaker is the adult living in the household where the allegation occurs who assumes the most responsibility for childcare. When two adult caretakers are present and the social worker is in doubt which one assumes the most child care responsibility, the adult with legal responsibility for the child(ren) involved in the report should be selected as the primary caretaker. For example, when a mother and her boyfriend reside in the same household and appear to equally share care taking responsibilities for the child, the mother is selected. If this

does not resolve the question, the legally responsible adult who was a perpetrator or alleged perpetrator should be selected. For example, when a mother and a father reside in the same household and appear to equally share care taking responsibilities for the child and the mother is the perpetrator (or the alleged perpetrator), the mother is selected. In circumstances where both parents are in the household, equally sharing care taking responsibilities, and both have been identified as perpetrators or alleged perpetrator, the parent demonstrating the more severe behavior is selected. Only one primary caretaker can be identified.

The secondary caretaker is defined as an adult living in the household who has routine responsibility for childcare, but less responsibility than the primary caretaker. A partner may be a secondary caretaker even though he/she has minimal responsibility for care of the child.

## **Appropriate Completion:**

The risk assessment is completed based on conditions that exist at the time the incident is reported and investigated/assessed, as well as the prior history of the family. Only one household can be assessed on the risk assessment form. Choose the household in which the child abuse/neglect incident is alleged.

**Scoring Individual Items:** A score for each assessment item is derived from the worker's observation of the characteristics it describes. Some characteristics are very objective (such as prior CA/N history or the age of the child). Others require the worker to use professional judgment based on his or her assessment of the family. Sources of information used to determine the worker's response to an item may include statements by the child, caretaker, or collateral persons; worker observations; reports; or other reliable sources.

The worker should refer to definitions to determine their response for each item. After all items are scored, the worker totals the score and indicates the corresponding risk level for each index. Next, the scored risk level (which is the higher of the abuse or neglect index) is entered.

**Policy Overrides:** After determining the scored risk level, the worker determines whether any of the policy override reasons exist. Policy overrides reflect incident seriousness and/or child vulnerability concerns, and have been determined by the agency to warrant a risk level designation of very high regardless of the risk level indicated by the assessment tool. Policy overrides are as follows:

- 1) Sexual abuse case AND the perpetrator is likely to have access to the child victim.
- 2) Non-accidental injury to a child under age two years.
- 3) Severe non-accidental injury (for example, brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocations, sprains, internal injury, poisoning, burns, scalds, severe cuts, or any other physical injury that seriously impairs the health or well-being of the child(ren) which requires medical treatment).
- 4) Parent/caretaker action or inaction resulted in death of a child due to abuse or neglect (previous or current), and other children remain in the home.

**Discretionary overrides:** A discretionary override is applied by the worker to increase the risk level by one risk classification in any case in which the risk level set by the assessment tool is too low. This may occur when the worker is aware of conditions affecting risk that are not captured within the items on the risk assessment. Discretionary overrides require supervisor approval.

After completing the override section, indicate the final risk level.

In the case status section, the worker indicates whether the investigation/assessment will be closed or opened for ongoing services, and indicate the reason using the codes provided.

Both the worker and the supervisor sign and date the form.

#### **Family Risk Assessment Definitions:**

#### **NEGLECT INDEX**

#### N1. Current Report is for Neglect.

Score 1 if the current report is for any type of neglect. This includes:

- severe and general neglect;
- exploitation (excluding sexual exploitation); and
- caretaker absence/incapacity.

This includes reported allegations as well as allegations made during the course of the investigation/assessment.

# N2. Prior Investigations/Assessments.

- a) Score 0 if there were no investigations/assessments (do not include referrals that were not assigned for investigation/assessment) prior to the current investigation/assessment.
- b) Score 1 if there was one or more investigations/assessments (do not include referrals that were not assigned for investigation/assessment), substantiated or not, for any type of <u>abuse</u> prior to the current investigation/assessment. Abuse includes physical, emotional, or sexual abuse/sexual exploitation.
- c) Score 2 if there was one or two investigations/assessments (do not include referrals that were not assigned for investigation/assessment), substantiated or not, for any type of <u>neglect</u> prior to the current investigation/assessment, with or without abuse investigations.
- d) Score 3 if there were three or more investigations/assessments (do not include referrals that were not assigned for investigation/assessment), substantiated or not, for any type of <u>neglect</u> prior to the current investigation/assessment, with or without abuse investigations/assessments.

#### Neglect includes:

- severe and general neglect;
- exploitation (excluding sexual exploitation); and
- caretaker absent/incapacitated.

If reports indicate history from other state jurisdictions, the reports should be verified. Exclude investigations/assessments of out-of-home perpetrators (e.g., day care) unless one or more caretakers failed to protect.

# N3. Household has Previously Received Services as a Result of a CA/N Investigation/Assessment.

Score 1 if household has previously <u>received</u> services or is currently <u>receiving</u> services as a result of a prior investigation/assessment. Do not include delinquency services or cases opened at family's request (SS-63 open reason=A or E).

## N4. Number of Child Victims Involved in the CA/N Report.

Score based on the number of children under 18 years of age for whom abuse or neglect was alleged or substantiated in the current investigation/assessment.

## N5. Age of Youngest Child in Household

Score based on the current age of the <u>youngest child</u> presently in the household where the maltreatment incident reportedly occurred. If a child is removed as a result of the current investigation/assessment, count the child as residing in the home.

## N6. Primary Caretaker Provides Physical Care Inconsistent with Child Needs.

Score 1 if physical care of child(ren) (age-appropriate feeding, clothing, shelter, hygiene, and medical care of child[ren]) threatens the child(ren)'s well-being or results in harm to child(ren). Examples include but are not limited to:

- repeated failure to obtain standard immunizations;
- failure to obtain medical care for severe or chronic illness:
- repeated failure to provide child(ren) with clothing appropriate to the weather;
- persistent vermin infestations;
- inadequate or inoperative plumbing or heating;
- poisonous substance or dangerous objects lying within reach of small child(ren);
- child's functioning is impaired due to poor hygiene as indicated by filthy clothes, lack of bathing, dirt caked on skin and hair, and/or strong odor.

## N7. Primary Caretaker has a Past or Current Mental Health Problem.

Score 1 if credible and/or verifiable statements by the primary caretaker or others indicate that the primary caretaker:

- has been diagnosed with a Diagnostic and Statistical Manual (DSM) condition by a mental health clinician;
- had repeated referrals for mental health/psychological evaluations; or
- was recommended for treatment/hospitalization or treated/hospitalized for emotional problems at any time.

# N8. Primary Caretaker has Historic or Current Alcohol or Drug Problem that Interferes with his/her/family's Functioning.

Interference with functioning is evidenced or verified by:

- substance use that affects or affected:
- employment,
- criminal involvement,
- marital or family relationships, or
- ability to provide protection, supervision, and care for the child(ren);
- an arrest in the past two years for driving under the influence or refusing breathalyzer testing;
- self report of a problem;
- treatment received currently or in the past;
- multiple positive urine samples;
- health/medical problems resulting from substance use;
- child(ren) was diagnosed with Fetal Alcohol Syndrome or Exposure (FAS or FAE) or child had a positive toxicology screen at birth <u>and</u> primary caretaker was birthing parent. Note: May include previous drug-related referrals at birth.

## Score the following characteristics and record the sum as the item score.

a) Score 0 if no past or current substance abuse problems.

- b) Score 1 if past or current alcohol abuse.
- c) Score 1 if past or current drug abuse.

Legal, non-abusive prescription drug use should not be scored.

#### N9. Characteristics of Children in the Household.

Score based on each characteristic present and record the sum as the item score:

- a) Score 0 if no child in the household exhibits characteristics listed below.
- b) Score 1 if any child in the household is medically fragile, defined as having a longterm (six months or more) physical condition requiring medical intervention or diagnosed as failure to thrive.
- c) Score 1 if any child is developmentally or physically disabled, including any of the following: mental retardation, learning disability, other developmental problem or significant physical handicap.
- d) Score 1 if any child had a positive toxicology report for alcohol or another drug at birth. Note: May include previous drug-related referrals at birth.

### N10. Housing.

Score based on each characteristic present and record the sum as the item score:

- a) Score 0 if the family has housing that is physically safe.
- b) Score 1 if the family has housing but the current housing situation is physically unsafe such that it does not meet the health or safety needs of the child(ren) (for example: exposed wiring, inoperable heat or plumbing, vermin infestations, human/animal waste on floors, rotting food).
- c) Score 2 if the family is homeless or about to be evicted at the time the investigation began.

#### **ABUSE INDEX**

## A1. Current Report is for Abuse.

Score 1 if the current report is for any type of abuse. This includes:

- physical abuse;
- emotional maltreatment; or
- sexual abuse/sexual exploitation.

This includes reported allegations as well as allegations made during the course of the investigation/assessment.

## A2. Number of Prior Abuse Investigations/Assessments.

Score based on the number of all investigations/assessments, substantiated or not, which were assigned for investigation/assessment for any type of <u>abuse</u> (physical, emotional, or sexual abuse/sexual exploitation) prior to the report resulting in the current investigation/assessment. Where possible, abuse history from other county or state jurisdictions should be checked. Exclude investigations/assessments of out-of-home perpetrators (e.g., day care) unless one or more caretakers failed to protect.

# A3. Household has Previously Received Services as a Result of a CA/N Investigation/Assessment.

Score 1 if household has previously <u>received</u> services or is currently <u>receiving</u> services as a result of a prior investigation/assessment. Do not include delinquency services or cases opened at family's request (SS-63 open reason=A or E).

## A4. Prior Injury to a Child Resulting from CA/N.

Score 1 if a child(ren) sustained an injury resulting from abuse and/or neglect prior to the report which resulted in the current investigation/assessment. Injury sustained as a result of abuse or neglect may range from bruises, cuts and welts to an injury which requires medical treatment or hospitalization such as a bone fracture or burn.

## A5. Primary Caretaker's Assessment of Incident.

Score based on each characteristic and record the sum as the item score:

- a) Score 0 if none of the characteristics below is applicable.
- b) Score 1 if the primary caretaker blames child(ren) for incident. Blaming refers to caretaker's statement that maltreatment incident occurred because of child(ren)'s action or inaction (for example, claiming that child seduced him/her, or child deserved beating because he/she misbehaved).
- c) Score 2 if the primary caretaker justifies maltreatment of child(ren). Justifying refers to caretaker's statement that their action or inaction, which resulted in harm to the child, was appropriate (for example, claiming that this form of discipline was how they were raised, so it is alright).

## A6. Domestic Violence (two or more incidents) in the Household in the Past Year.

Score 2 if credible statements or observations indicate there have been two or more incidents of domestic violence in the household within the past year, <u>or</u> multiple periods of intimidation/threats/harassment between caretakers or between a caretaker and a past or present intimate partner within the past year.

## A7. Primary Caretaker Characteristics.

Score based on each characteristic present and record the sum as the item score:

- a) Score 0 if the primary caretaker does not exhibit characteristics listed below.
- b) Score 1 if the primary caretaker provides insufficient emotional/psychological support to the child(ren), such as persistently berating/belittling/demeaning child(ren) or depriving child(ren) of affection or emotional support.
- c) Score 1 if the caretaker's disciplinary practices caused or threatened harm to child(ren) because they were excessively harsh physically or emotionally and/or inappropriate to the child(ren)'s age or development. Examples include but are not limited to:
  - locking child(ren) in a closet or basement;
  - holding child(ren)'s hand over fire;
  - hitting child(ren) with dangerous instruments; or
  - depriving young child(ren) of physical and/or social activity for extended periods.
- d) Score 1 if the primary caretaker is domineering, indicated by controlling, abusive, overly-restrictive, or unfair behavior, or over-reactive rules.

## A8. Primary Caretaker has a History of Abuse or Neglect as a Child.

Score 1 if credible statements by the primary caretaker, others, or through the registry indicate that the primary caretaker was maltreated as a child (maltreatment includes neglect or physical, sexual or other abuse).

# A9. Secondary Caretaker has Historic or Current Alcohol or Drug Problem that Interferes with his/her/family's Functioning.

Interference with functioning is evidenced or verified by:

- substance use that affects or affected:
- employment,
- criminal involvement.

- marital or family relationships,
- ability to provide protection, supervision, and care for the child(ren), or
- an arrest in the past two years for driving under the influence or refusing breathalyzer testing;
- self report of a problem;
- received or is receiving treatment;
- multiple positive urine samples;
- health/medical problems resulting from substance use;
- child(ren) was diagnosed with Fetal Alcohol Syndrome (FAS or FAE) or child had a
  positive toxicology screen at birth <u>and</u> secondary caretaker was birthing parent. Note:
  Note: May include previous drug-related referrals at birth.

## Score the following:

- a) Score 0 if no past or current substance abuse problems.
- b) Score 1 if past or current substance abuse.

Legal, non-abusive prescription drug use should not be scored.

#### A10. Characteristics of Children in Household.

Score based on each characteristic present and record the sum as the item score:

- a) Score 0 if no child in the household exhibits characteristics listed below.
- b) Score 1 if any child in the household has been referred to juvenile court for delinquent or status offense behavior. Status offenses not brought to court attention but which create stress within the household should also be scored, such as children who run away or are habitually truant.
- c) Score 1 if any child is developmentally disabled, including any of the following: mental retardation, learning disability, or other developmental problem.
- d) Score 1 if any child in the household has mental health or behavioral problems not related to a physical or developmental disability (includes ADHD/ADD). This could be indicated by:
  - a DSM diagnosis;
  - receiving mental health treatment;
  - attendance in a special classroom because of behavioral problems; or
  - currently taking psychoactive medication.

MEMORANDA HISTORY: CD05-72